

410 IAC 1-2.5-118 Measles (rubeola); specific control measures

Authority: IC 16-19-3-4; IC 16-41-2-1

Affected: IC 16-41-2; IC 16-41-9

Sec. 118. The specific control measures for measles (rubeola) (infectious agent: measles virus) are as follows:

(1) An investigation by a department field representative, in cooperation with the local health officer, shall be performed immediately, include case management, and consist of the following:

(A) Ascertainment of immunization history.

(B) Case ascertainment.

Identification and listing of contacts. Contacts are defined as any individual who was in the same room while the case was present or for two (2) hours afterwards at any time during the infectious period. The infectious period is defined as four (4) days before rash onset until four (4) days after the appearance of the rash. All children and adults (including staff members) attending the same school, daycare, or preschool as the case are defined as contacts.

(C) For outbreak control in public or private schools, daycare facilities, preschools, or postsecondary facilities, on the same day that a report of a suspected case of measles is received, school personnel shall do the following:

(i) Conduct an inquiry into absenteeism to determine the existence of any other cases of the illness.

(ii) Immediately report the suspect case or cases to the local health department or the department.

(iii) Send a notice home with each student, attendee, or employee born in or after 1957 who has not presented proof of immunity explaining that the student, attendee, or employee shall be excluded from the date of the letter, until acceptable proof of immunity is received by the school, daycare facility, preschool, or postsecondary facility, or in the case of medical or religious exemptions, until twenty-one (21) days after the onset of the last reported measles case. Persons receiving second doses of measles-containing vaccine, as well as previously unvaccinated persons receiving their first dose as part of the outbreak control program, may be immediately readmitted to school provided all persons without documentation of immunity have been excluded and that vaccination occurred within seventy-two (72) hours of exposure. Acceptable proof of immunity shall consist of a:

(AA) written record from the student's or employee's physician, parent, or guardian that indicates the dates of vaccination (on or after the first birthday) and the type of vaccine administered;

(BB) laboratory report showing confirmation of previous measles infection; or (CC) laboratory report showing a protective measles antibody titer.

(iv) Make available to officials of the local health department or the department, or both, involved in investigating and controlling the outbreak, immunization records of all students and employees born in or after 1957 in the school or attendees, students, and employees born in or after 1957 in the daycare or preschool.

(D) For outbreak control in health care facilities, all health care workers and employees, regardless of age, without evidence of immunity who have been exposed to measles should be excluded from the facility from the fifth day to the twenty-first day after exposure, even if postexposure vaccination or immune globulin (IG) was administered.

(2) In addition to standard precautions, airborne precautions shall be followed for hospitalized patients through the fourth day of the rash to reduce the exposure of other persons at high risk. Other infected persons shall be excluded from:

(A) school and daycare facilities or preschools;

(B) public gatherings; and

(C) contact with susceptible persons outside the household; for

at least four (4) days after appearance of the rash.

(3) Concurrent disinfection is not required.

(4) Quarantine may be required. Children in institutions, wards, or dormitories for children may be quarantined. If measles occurs in an institution where infants reside, these infants shall be segregated from infected persons and susceptible contacts. Susceptible individuals exposed to measles should avoid contact with other susceptible persons outside the household.

(5) Protection/immunization of contacts shall be as follows:

(A) Live measles vaccine given to inadequately vaccinated persons within seventy-two (72) hours of exposure may provide protection against disease.

(B) IG may be given within six (6) days to the susceptible household or other contacts, especially those for whom:

(i) risk of complications is very high, such as contacts less than twelve (12) months of age; or

(ii) the measles vaccine is contraindicated.

(C) Live measles vaccine should be given five (5) months later to IG recipients for whom vaccine is not

contraindicated.

(6) The Centers for Disease Control and Prevention and the Council of State and Territorial Epidemiologists set the standard clinical and laboratory case definition.

*(Indiana State Department of Health; 410 IAC 1-2.5-118; effective Dec 25, 2015)*